Case 16-20458 Doc 1 Fill in this information to identify your case:	Filed 06/23/16	Entered 06/23/16 12:33:15 age 1 of 68	Desc Main
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)			
Case number (if known)	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13		☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	Senque	
Write the name that is on	First name	First name
your government-issued picture identification (for	Middle name	Middle name
example, your driver's	Glass	
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last	First name	First name
8 years	Middle name	Middle name
Include your married or maiden names.	midule name	wildule flame
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX- <u>2432</u>	xxx - xx-
Security number or	OR	OR
federal Individual Taxpayer Identification	9 xx - xx-	9 xx - xx-
number (ITIN)		

Sengue Case 16-20458 Doc 1 Filed 06 (23/16) Entered 06/23/16 (142:33:15 Desc Main Debtor 1 Page 2 of 68 Document Print **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 1852 W 80th St Number Number Street Street 60620 Chicago Illinois City State Zip Code City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City Zip Code State City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Part 2: Tell the Court About Your Bankruptcy Case 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for No. bankruptcy within the last 8 years? Yes. District Case number District Case number District When Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with you, or by a Debtor Relationship to you business partner, or District Case number, if known by an affiliate? 11. Do you rent your ✓ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

this bankruptcy petition.

Sengue Case 16-20458 Doc 1 Filed 06423/16 Entered 06/23/16 (142:33:15 Desc Main Page 4 of 68 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building

that needs urgent

repairs?

State

City

Zip Code

First Name

iddle Name Docume

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Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

You must check one:

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case):

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credi
counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

do so.

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

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Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in

person, by phone, or through the internet, even after I reasonably tried to

do so.

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Doc 1 Filed 06623/16 Entered 06/23/16 (12:33:15 Desc Main Page 6 of 68 **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your **✓** \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Senque Glass Signature of Debtor 2 Signature of Debtor 1 Executed on 6/23/2016 Executed on

MM / DD / YYYY

MM / DD / YYYY

Debtor 1 Senque Case 16-20458 Doc 1 Filed 06623/16 Entered 06/23/16 (1/2):33:15 Desc Main

First Name Docume Pite Page 7 of 68

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Mark Bernachea		Date	6/23/2016	
Signature of Attorney for Debtor			MM / DD / YYYY	
Mark Bernachea				
Printed name				
Semrad Law Firm				
Firm name				
11101 S. Western Avenue				
Street				
Chicago	Illinois		60643	
City	State		Zip Code	
Contact phone		E	mail address	
Bar number			State	

<u> Case 16-20458 Doc 1 - Filed 06/23/16 - Entered 06/2</u>3/16 12:33:15 - Desc Main Fill in this information to identify your case: Debtor 1 Senque Glass First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$7,650.00 1b. Copy line 62, Total personal property, from Schedule A/B \$7,650.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$9,500.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$64,827.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$29.148.36 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F...... \$103,475.36 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$1,494.00 Copy your combined monthly income from line 12 of Schedule I.....

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$1,294.00

Debtor 1 SengueCase 16-20458 Doc 1 Filed 06423/16 Entered 06/23/16 (1/2):33:15 Desc Main

Page 9 of 68 **Answer These Questions for Administrative and Statistical Records** Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$1,429.33 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$64,827.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$23,521.00 9d. Student loans. (Copy line 6f.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

\$88,348.00

	Case 16-20458	R Doc 1	Filed 06/23/16	Entered 06/23/16	12:33:15	Desc Main
Fill in this i	information to identify your case:					
Debtor 1	Sengue		Glass	;		
	First Name	Middle I	Name Last N	lame		
Debtor 2 (Spouse, it	f filing) First Name	Middle I	Name Last N			
United Sta	ites Bankruptcy Court for the:	Northern	District of II			
Case num (If known)	ber		(1	State)		
Officia	I Form 106A/B					Check if this is an amended filing
Sched	dule A/B: Prope	rty				12/1
esponsibl vrite your l Part 1:	where you think it fits best. Be le for supplying correct informame and case number (if knot bescribe Each Residence own or have any legal or equ	mation. If more spown). Answer eve ce, Building, I	pace is needed, attach ery question. _and, or Other Rea	a separate sheet to this forn	m. On the top of a	any additional pages,
<u>~</u>	No. Go to Part 2					
	Yes. Where is the property?					
1.1	Street address, if available, or o	other description	What is the property Single-family home)	the amount of ar	ecured claims or exemptions. Put ny secured claims on Schedule D: Have Claims Secured by Property.
	officer address, if available, of c	arier accompacit	Duplex or multi-un	J	Current value	, , ,
			Condominium or co	•	entire property	
			Manufactured or m	oblie nome	-	
	Number Street		Investment property	1	Describe the n	ature of your ownership
			Timeshare	,	interest (such a	as fee simple, tenancy by or a life estate), if known.
	City State	Zip Code	Other			or a me estate), il known.
			Debtor 1 only Debtor 2 only Debtor 1 and Debtor	in the property? Check one. or 2 only debtors and another	Check if the (see instru	is is community property actions)
			Other information yo property identification	ou wish to add about this ite	m, such as local	
If you c	own or have more than one, list he	ere:	property rue			
1.2	Street address, if available, or o	other description	What is the property Single-family home	9	the amount of ar	ecured claims or exemptions. Put ny secured claims on Schedule D: Have Claims Secured by Property.
	— available, or e		Duplex or multi-un Condominium or co Manufactured or m	poperative	Current value entire property	of the Current value of the
			Land			<u> </u>
	Number Street		Investment property Timeshare Other	1	interest (such a	ature of your ownership as fee simple, tenancy by or a life estate), if known.
	City State	Zip Code				
			Debtor 1 only Debtor 2 only Debtor 1 and Debtor	in the property? Check one. or 2 only debtors and another	Check if the (see instru	is is community property octions)

Other information you wish to add about this item, such as local property identification number:

Debtor 1	SenqueCase 16-204	58 Doc 1 I	Filed 06/23/16 Entered 06/23/16	6 (142) 33: <u>15 De</u>	sc Main
1.3 Stre	et address, if available, or oth	w	Documernal Page 11 of 68 What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any secu	claims or exemptions. Put used claims on Schedule D: Claims Secured by Property. Current value of the portion you own?
Nun City	nber Street State	Zip Code	Land Investment property Timeshare Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
		Cot	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, or operty identification number:	(see instructions	ommunity property
you ha		ion you own for all c e that number here	of your entries from Part 1, including any entries f		
Do you ov you own th 3. Cars, va	vn, lease, or have legal or e at someone else drives. If you ns, trucks, tractors, sport utilit	quitable interest in a lease a vehicle, also r	any vehicles, whether they are registered or not? In report it on Schedule G: Executory Contracts and Unexpes		
✓ Ye 3.1	Make Model: Year: Approximate mileage: Other information: used	Porsche Cayenne 2005 138000	Who has an interest in the property? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? \$6100.00
3.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?

Debtor 1	SenqueCase 16-20458 Doc 1	Filed 06623/16 Entered 06/23/16	6/142/33: <u>15 Des</u>	c Main	
	First Name Middle Name	Document Page 12 of 68			
3.3	Make	Who has an interest in the property? Check	Do not deduct secured cl	•	
	Model:	one.	the amount of any secure		
	Year:	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.	
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the	
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see			
		instructions)			
3.4	Make	Who has an interest in the property? Check	Do not deduct secured cl	aims or exemptions. Put	
	Model:	one.	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
	Year:	Debtor 1 only			
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the	
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see			
		instructions)			
4.1	Yes Make	Who has an interest in the property? Check	Do not deduct secured cl	aims or exemptions. Put	
4.1	Model:	one.	the amount of any secure	•	
	Year:	Debtor 1 only	•	ims Secured by Property.	
	Approximate mileage:	Debtor 2 only	0	0	
	Other information:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?	
	Other Information.	At least one of the debtors and another			
		Check if this is community property (see instructions)			
4.2	Make	Who has an interest in the property? Check	Do not deduct secured cl	aims or exemptions. Put	
	Model:	one.	the amount of any secure	ed claims on <i>Schedule D:</i>	
	Year:	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.	
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the	
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another	-		
		Check if this is community property (see instructions)			
5. Add	the dollar value of the portion you own for a	all of your entries from Part 2, including any entries f	or pages	100.00	
you ha	ve attached for Part 2. Write that number her	'e			

Debtor 1 SenqueCase 16-20458 Doc 1 Filed 06623/16 Entered 06/23/16 (1/23/33:15 Desc Main First Name Document Page 13 of 68

Describe Your Personal and Household Items

D	o you own or ha	ve any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6	. Household goods	and furnishings	
		iances, furniture, linens, china, kitchenware	
П	No		
	l I	minaallan aaya hayaahald aaada and fumishinga	
⊻	res. Describe	miscellaneous household goods and furnishings	\$600.00
	. Electronics Examples: Televisions	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	
	No		
~	Yes. Describe	cell phone, television	\$400.00
		·	ψ-00.00
8	. Collectibles of valu	ie –	
	Examples: Antiques a	nd figurines; paintings, prints, or other artwork; books, pictures, or other art objects;	
	stamp, coi	n, or baseball card collections; other collections, memorabilia, collectibles	
V	No		
F	Yes. Describe		
	l		
		orts and hobbies otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes s; carpentry tools; musical instruments	
$\overline{\mathbf{V}}$	No		
F	Yes. Describe		
_			
	0. Firearms Examples: Pistols, rifle	es, shotguns, ammunition, and related equipment	
È	Yes. Describe		
Н	res. Describe		
	1. Clothes Examples: Everyday o	clothes, furs, leather coats, designer wear, shoes, accessories	
	Yes. Describe	used clothing and apparel	# 550.00
Ľ		dood old inig direct appeal of	\$550.00
	2. Jewelry Examples: Everyday je gold, silve	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
$\overline{\mathbf{V}}$	No		
f	Yes. Describe		
_	3. Non-farm animals		
	Examples: Dogs, cats		
	No	,	
뜯			
L	Yes. Describe		
1	4. Any other person	al and household items you did not already list, including any health aids you did not list	
~	No		
	Yes. Describe		
1	5. Add the dollar val	ue of all of your entries from Part 3, including any entries for pages you have attached	0.1550.00
		number here	<u>\$1550.00</u>

Debtor 1 Senque Case 16-20458 Doc 1 Filed 06/23/16 Entered 06/23/16 (1/22/333:15 Desc Main

Middle Name Documeint Page 14 of 68

Describe Your Financial Assets

Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. **✓** No Institution name: Yes 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ✓ No Institution or issuer name: Yes 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

Deb	tor 1 SenqueCase It		FIIEd Operation	_Entered was 2011	b.60 (if.lkadwo33: <u>15</u> _	Desc Main
	First Name	Middle Name		Page 15 of 68		
20.		orate bonds and other neg				
		nclude personal checks, cash nts are those you cannot tran				
	✓ No	,	, , , , , , , , , , , , , , , , , , ,	J		
	Yes. Give specific					
	information about	Issuer name:				
	them					
		-			-	_
						_
21.		accounts A, ERISA, Keogh, 401(k), 40	03(b), thrift savings accour	its, or other pension or profi	it-sharing plans	
	✓ No	7 , = ,	00(0), tillin 00111.go 000011	no, or ourse portoror or pro-	n onamy plane	
	Yes. List each	Type of account:	Institution name:			
	account separately.	401(k) or similar plan:				_
		Pension plan:				
		IRA:				
						_
		Retirement account:	-			
		Keogh:				_
		Additional account:				
		Additional account:				
22.	Security deposits and p	orepayments deposits you have made so th	nat vou may continue servic	a or use from a company		
	Examples: Agreements v	with landlords, prepaid rent, p			าร	
	companies, or others					
	✓ No		Institution name:			
	Yes	Electric:	msututorriame.			
			-			_
		Gas:				_
		Heating oil:				
		Security deposit on rental u	unit:			_
		Prepaid rent:				
		Telephone:				
		Water:				
		Rented furniture:				
		Other:				_
23.	Annuities (A contract for	r a periodic payment of mone	ey to you, either for life or for	a number of years)		
	✓ No			•		
	Yes	Issuer name and descriptio	on:			
						_

Debte	or 1	Senque Ca First Name	<u>ase 1</u>	6-20458	Doc 1		06¢23/16 cumente			16 (142:33: <u>15</u>	Des	sc Main
24.				tion IRA, in a , 529A(b), and		a qualifie	d ABLE progra	m, or und	er a qualified sta	ate tuition program.		
		No Yes	Institutio	on name and d	escription. Sep	parately file	the records of a	ny interest	s.11 U.S.C. § 521	(c):		
25.	exe	sts, equita rcisable fo No Yes. Desc	r your b		s in property	(other th	an anything lis	ted in line	1), and rights o	r powers		
26.	Exa.	ents, copy	rights, t				intellectual proyalties and licens		ments			
27.	Exa	enses, frar	n chises ding per	, and other ge mits, exclusive			ssociation holdin	gs, liquor	icenses, professi	onal licenses		
Mon	iey (or prope	erty ow	red to you?	?						pc Do	urrent value of the ortion you own? not deduct secured ims or exemptions.
28.	✓ I	Yes. Give s about you al	pecific in them, in		er					Federal: State: Local:		
	Exan	ily suppor <i>nples:</i> Past No		ump sum alimo	ny, spousal sup	oport, child	support, mainte	nance, div	orce settlement, p	roperty settlement		
			pecific ir	nformation						Alimony: Maintenance: Support: Divorce settlement Property settlement		
	Exan	<i>nples:</i> Unpa	aid wage al Secur	one owes you es, disability ins ity benefits; unp			-	pay, vacati	on pay, workers' c	ompensation,		

Debt	or 1	SenqueCase 16 First Name	6-20458	Doc 1 Middle Name	Filed 06¢23/16 Documethtme	Entered 06/23/6 Page 17 of 68	L6 (142:33: <u>15</u> D	esc Main
31.		rests in insurance particles: Health, disabi		rance; health		redit, homeowner's, or rente	r's insurance	
		No Yes. Name the insur of each policy and lis			Company name:		Beneficiary:	Surrender or refund value:
32.	If you		of a living trust		meone who has died ceeds from a life insurance	policy, or are currently entitle	d to receive	
33.	Exar ✓				I have filed a lawsuit or nace claims, or rights to sue	nade a demand for payme	nt	
34.	to s	er contingent and of the claims No Yes. Describe	unliquidated	claims of ev	very nature, including co	unterclaims of the debtor	and rights	
35.	✓	financial assets yo No Yes. Describe	u did not alre	ady list				
36.			-			ies for pages you have att		
Part	5:	Describe Any B	usiness-R	elated Pro	pperty You Own or H	ave an Interest In. Li:	st any real estate ir	n Part 1.
37.	Do y	ou own or have an	y legal or equ	uitable intere	est in any business-relate	ed property?		
		No. Go to Part 6. Yes. Go to line 38.						Current value of the portion you own? Do not deduct secured claims or exemptions
38.	✓	ounts receivable or No Yes. Describe	commissions	s you alread	y earned			
39.		ce equipment, furn mples: Business-rela			odems, printers, copiers, fa	ax machines, rugs, telephone	es, desks, chairs, electroni	c devices
		No Yes. Describe						

Deb	tor 1 Senque ase I	<u> 15 De Duct Fileu Uoraasi to Eilleteu</u> Waretoindeo (ilkabuo 3. <u>15 De</u>	SC Main
40.	First Name Machinery, fixtures, equ	Middle Name Documer Page 18 of 68 sipment, supplies you use in business, and tools of your trade	
	✓ No		
	Yes. Describe		
41.	Inventory		
	✓ No		
	Yes. Describe		
42.	Interests in partnershi	os or joint ventures	
	✓ No	Name of entity: % of ownership:	
	Yes. Give specific	Name of Chity. 70 of Ownership.	
	information about them		
43. (Customer lists, mailing	ists, or other compilations	
	✓ No		
	_	lude personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	— ∏ No		
	Yes. Descri	be	
	_		
44.	_	roperty you did not already list	
	✓ No		
	Yes. Give specific information		
			_
15. A	dd the dollar value of al	of your entries from Part 5, including any entries for pages you have attached	
	art 5. Write that number		
Part		arm- and Commercial Fishing-Related Property You Own or Have an Interest In. interest in farmland, list it in Part 1.	
46.	Do you own or have a	y legal or equitable interest in any farm- or commercial fishing-related property?	
	✓ No. Go to Part 7.		Current value of the portion you own?
	Yes. Go to line 47.		Do not deduct secured claims
			or exemptions
47.	Farm animals Examples: Livestock, pou	ltry, farm-raised fish	
	✓ No		
	Yes. Describe		

Deb	tor 1	SenqueCase 16-204	58 Doc 1 Middle Name		Entered 06/23/116 /112:33:15 Page 19 of 68	Desc	Main
48.	Cro	ps-either growing or harve	ested	Document	. ago 10 0. 00		
	✓	No					
		Yes. Describe					
49.	Farr	n and fishing equipment, i	mplements, machi	inery, fixtures, and tools	of trade		
	✓	No					
		Yes. Describe					
50.	Farı	n and fishing supplies, che	emicals, and feed				
	✓	No					
		Yes. Describe					
51.	Any	farm- and commercial fish	ning-related proper	ty you did not already lis	st		
	V	No					
		Yes. Describe					
					for pages you have attached		
	ui t 0.	With that named here					
Part	7:	Describe All Property	You Own or Ha	ave an Interest in Th	nat You Did Not List Above		
53.		you have other property of mples: Season tickets, country		not already list?			
	✓						
	_	Yes. Give specific					
	_	information					
				7 West of a constant	_		
54. A	dd th	e dollar value of all of your	entries from Part	7. Write that number her	'e	.▶	
Part	8.	List the Totals of Eacl	h Part of this F	orm			
55. F	Part 1	: Total real estate, line 2			>		
56. p	oart 2	total vehicles, line 5		\$6100.00	<u> </u>		
57. P	art 3:	Total personal and house	hold items, line 15	\$1550.00			
58. P	art 4:	Total financial assets, line	36				
59. F	Part 5	: Total business-related pr	operty, line 45				
60. F	Part 6	: Total farm- and fishing-re	elated property, lin	ne 52			
61. F	Part 7	: Total other property not I	listed, line 54				
62. 1	Γotal	personal property. Add lines	s 56 through 61	\$7650.00			+ \$7650.00
					Copy personal property to	otal >	
							\$7650.00
63. T	otal c	of all property on Schedule	A/B. Add line 55 +	line 62			

Fill in this inforn	nation to identify your cas		9		
Debtor 1	Senque		Glass		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	Northern	District of Illinois		
Case number			(State)		
(If known)					
Official I	Form 106C				Check if this is amended filing
		perty You Clair	m as Exemnt		12
nformation. Uslaim as exer the top of any For each iter	Jsing the property y mpt. If more space i additional pages, v m of property you	ou listed on <i>Schedule A</i> /s needed, fill out and att write your name and case claim as exempt, you n	people are filing together, both are execute (Official Form 106A/B) and to this page as many copies of enumber (if known). The amount of the extively, you may claim the full fair	as your source Part 2: Addition emption you	e, list the property that you onal Page as necessary. On claim. One way of doing s
exempted up eceive certa exemption of property is compared. Part 1: Iden 1. Which se You a	to the amount of ain benefits, and to follow of fair mark determined to excentify the Property Your tof exemptions are your claiming state and federate claiming federal exemptions.	any applicable statuto ax-exempt retirement for the value under a law the ed that amount, your exputations are considered to the control of t	ry limit. Some exemptions—such unds—may be unlimited in dollar nat limits the exemption to a participation would be limited to the even if your spouse is filing with you. 11 U.S.C. § 522(b)(3) exempt, fill in the information below.	amount. Hov cular dollar a	wever, if you claim an amount and the value of th
exempted up eceive certa exemption of property is concept. Part 1: Iden 1. Which se You a You a 2. For any p	to the amount of ain benefits, and to follow of fair mark determined to excentify the Property Your tof exemptions are your claiming state and federate claiming federal exemptions.	any applicable statuto ax-exempt retirement for exet value under a law the ed that amount, your exempt a claim as Exempt a claiming? Check one only, exercited and another control of the portion of the portion you own Copy the value from	ands—may be unlimited in dollar nat limits the exemption to a partice exemption would be limited to the even if your spouse is filing with you. 11 U.S.C. § 522(b)(3) Exempt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption.	amount. How cular dollar a applicable s Spec	wever, if you claim an amount and the value of th
exempted up eceive certa exemption of property is concept. Part 1: Iden 1. Which se You a You a 2. For any p	to the amount of ain benefits, and ta f 100% of fair mark letermined to excentify the Property You to f exemptions are your claiming state and federal exemptions are your claiming federal exemptions of the property	any applicable statuto ax-exempt retirement for execution and the execution as Exempt and Claim as Exempt a claiming? Check one only, exercited and line coroperty on the portion you own	ands—may be unlimited in dollar nat limits the exemption to a partice exemption would be limited to the even if your spouse is filing with you. 11 U.S.C. § 522(b)(3) Exempt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption.	amount. How cular dollar a applicable s Spec	wever, if you claim an amount and the value of the statutory amount.
exempted up ecceive certa exemption o property is c Part 1: Iden 1. Which se You a You a Carry p Brief deso on Sched	to the amount of ain benefits, and ta f 100% of fair mark letermined to exceptify the Property Your tof exemptions are your e claiming state and federate claiming federal exemptoperty you list on Schoription of the property ule A/B that lists this pused clothing and	any applicable statuto ax-exempt retirement for et value under a law the ed that amount, your end ou Claim as Exempt ou claiming? Check one only, end eral nonbankruptcy exemptions. ptions. 11 U.S.C. § 522(b)(2) edule A/B that you claim as end or and line corporate	ands—may be unlimited in dollar nat limits the exemption to a partice exemption would be limited to the even if your spouse is filing with you. 11 U.S.C. § 522(b)(3) Exempt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption.	amount. How cular dollar a applicable s Spec	wever, if you claim an amount and the value of the statutory amount.
exempted up ecceive certa exemption of property is confident and the	to the amount of ain benefits, and ta f 100% of fair mark letermined to exceptify the Property Yet of exemptions are your e claiming state and federate claiming federal exemptoperty you list on School cription of the property ule A/B that lists this pure used clothing an apparel	any applicable statuto ax-exempt retirement for exet value under a law the ed that amount, your exempt a claiming? Check one only, exercal nonbankruptcy exemptions. ptions. 11 U.S.C. § 522(b)(2) edule A/B that you claim as exercised and line or and line or and line or and line or copy the value from Schedule A/B	ands—may be unlimited in dollar nat limits the exemption to a particle exemption would be limited to the even if your spouse is filing with you. 11 U.S.C. § 522(b)(3) Exempt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption.	amount. How cular dollar a applicable s Spec	wever, if you claim an amount and the value of the statutory amount.
exempted up ecceive certa exemption o property is c Part 1: Iden 1. Which se You a You a Carry p Brief descon Schedule a	to the amount of ain benefits, and ta f 100% of fair mark letermined to exceptify the Property Your tof exemptions are your eclaiming state and federate claiming federal exemptions of the property you list on School cription of the property ule A/B that lists this pure used clothing an apparel	any applicable statuto ax-exempt retirement for exet value under a law the event that amount, your exempt a claiming? Check one only, exemptions. It U.S.C. § 522(b)(2) event and line coroperty Current value of the portion you own Copy the value from Schedule A/B and \$550.00	ands—may be unlimited in dollar nat limits the exemption to a partice exemption would be limited to the exemption with you. 11 U.S.C. § 522(b)(3) Exempt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption. 10 \$550.00 100% of fair market value, up to any applicable statutory limit	amount. How cular dollar a applicable s Spec	wever, if you claim an amount and the value of the statutory amount.
exempted up ecceive certa exemption o property is c Part 1: Iden 1. Which se You a You a Conserved Brief description Line from	to the amount of ain benefits, and ta f 100% of fair mark letermined to exceptify the Property Your tof exemptions are your e claiming state and federate claiming federal exemptions of the property you list on School cription of the property ule A/B that lists this pure used clothing an apparel	any applicable statuto ax-exempt retirement for exet value under a law the event that amount, your exempt a claiming? Check one only, exemptions. It U.S.C. § 522(b)(2) event and line coroperty Current value of the portion you own Copy the value from Schedule A/B and \$550.00	ands—may be unlimited in dollar nat limits the exemption to a particle exemption would be limited to the even if your spouse is filing with you. 11 U.S.C. § 522(b)(3) Exempt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption.	amount. How cular dollar a applicable s	wever, if you claim an amount and the value of the statutory amount. Stific laws that allow exemption 735 ILCS 5/12-1001(a)

No Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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First Name Document Plane Page 21 of 68

Part 2: **Additional Page** Brief description of the property and line Current value of Amount of the exemption you claim Specific laws that allow exemption on Schedule A/B that lists this property the portion you Check only one box for each exemption. own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(c) \$6,100.00 description: used Line from 100% of fair market value, up to any Schedule A/B: 03 applicable statutory limit 735 ILCS 5/12-1001(b) Brief \$400.00 **V** cell phone, television description: \$400.00 Line from 100% of fair market value, up to any Schedule A/B: 07 applicable statutory limit

		Case 16-20458	Doc 1 Filed (06/23/16 Entered 06/23	3/16 12:33:15	Desc Main	
Fill ir	this inform	ation to identify your case:		_Q			
Debt	or 1	Senque		Glass			
		First Name	Middle Name	Last Name			
Debt (Spo		First Name	Middle Nosse	Loot Nome			
(Opo	use, ii iiiiig)	First Name	Middle Name	Last Name			
Unite	ed States Ba	ankruptcy Court for the: No	orthern	District of Illinois			
Case (If kne	e number own)			(State)			
Off	icial F	orm 106D					eck if this is a ended filing
Sc	hedu	le D: Creditor	s Who Hav	e Claims Secure	d by Prope	rty	12/1
corre	ect information. On the Do any cre	nation. If more space top of any additional ditors have claims secured	is needed, copy t pages, write your by your property? orm to the court with you	ried people are filing togethe he Additional Page, fill it out, name and case number (if kn r other schedules. You have nothing else	number the entri	•	
Part		All Secured Claims	vv.				
2.	List all secu	ured claims. If a creditor has	ticular claim, list the othe	claim, list the creditor separately for eac er creditors in Part 2. As much as ditor's name.	Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion
	Chase Auto Creditor's Na	ame	Describe the propert	y that secures the claim:	\$9,500.00	\$6,100.00	If any \$3,400.00
	Number	Street	Vehicle Loan As of the date you file	e, the claim is: Check all that apply.			
	Phoenix City	Arizona 85004 State ZIP Code	Contingent Unliquidated				
	_	the debt? Check one.	Disputed				
	Debtor	•	Nature of lien. Check	all that apply.			
	Debtor Debtor	2 only 1 and Debtor 2 only		made (such as mortgage or secured			
	At least	one of the debtors and	car loan) Statutory lien (suc	h as tax lien, mechanic's lien)			
i	another	if this claim relates to a	Judgment lien from	n a lawsuit			
	commi	unity debt	Other (including a	right to offset)	<u>-</u>		
	Date debt v	vas incurred <u>3/27/2015</u>	Last 4 digits of acco	unt number	_		
		Add the dollar value of you here:		on this page. Write that number	\$9,500.00		

Debtor 1 Servings Gines Care Ca			Case 16-20458	Doc 1	Filed 0	6/23/16	Entered 0	<u>6/2</u> 3/16 12	:33:15	Desc	Main	
Debtor 2 [Souce, Iffining) First Name	Fill I	n this informa	ation to identify your case:									
Deliber 2 (Secrete, 4 filing) First Name	Deb	otor 1		N.C. J. II.	NI			_				
United States Berkruptey Court for the: Northern	Deh	ntor 2	First Name	IVIIdale	Name	Lastin	ame					
Check if this is an amended filting Check if this is an amended filting Check if this is an amended fil		—	First Name	Middle	Name	Last N	ame	_				
Check if this is an amended filling Check if this claim relates to a community debt Check if this claim relates to a community debt Check if this claim relates to a community debt Check if this claim relates to a community debt Check if this claim relates to a community debt Check if this claim relates to a community debt Check if this claim relates to a community debt Check if this claim relates to a community debt Check if t	Unit	ted States Ba	nkruptcy Court for the:	Northern				_				
Schedule E/F: Creditors Who Have Unsecured Claims Schedule E/F: Creditors Who Have Unsecured Claims Se as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other hardy to any exocutory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form hardy to any exocutory contracts on schedule AB: Property (Official Form hardy to any exocutory contracts on schedule AB: Property (Official Form hardy exocutory) (Official Form hardy) (Official Form hardy							orace)	_				
Sas complete and accurate as possible. Use Part 1 for creditors with PRIDERTY claims and Part 2 for creditors with NORPROPETTY claims. List the other work to any security contracts on unexpriced leases that could result in a calcium. Also list as executary contracts on Schedule AIP. Property (Official Form 1066). Do not include any creditors with partially secured claims that related in Schedule Dr. Creditors With Poldic Claims that the continuation Page to this page. On the top of any additional pages, write your name and case number (if known). PARTY: List AII of Your PRIORTY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, is it is a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts are page to provide the priority of a priority and priority amounts. First List AII of your priority unsecured claims, list the creditor shape and priority and priority amounts are paged to the priority of a priority and priority amounts. First List AII of your priority amounts are paged to the priority and priority amounts are paged to the priority and priori	Off	ficial Fo	orm 106E/F					<u></u>		Chec	k if this is an	amended filing
party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule 6: Exercitory Contracts and Unexpired Leases (Official Form 1665), bo not include any creditors with partially secured claims that reliated in Schedule 6: Conditions With Policy Conditions and Unexpired Leases (Official Form 1665), but include any creditors with partially secured claims that he be also so that the first of the fage. On the top of any additional pages, write your name and case number (if known). List All of Your PRIORITY Unsecured Claims Dear	Sc	hedu	le E/F: Cred	litors W	Vho H	ave U	nsecure	ed Clain	าร			12/15
No. Go to Part 2. Yes. Y	oarty 106A are li the b	to any executes the total	cutory contracts or unex Schedule G: Executory C edule D: Creditors Who e left. Attach the Continu	pired leases that Contracts and U Hold Claims Se ation Page to t	at could res Inexpired L ecured by P his page. O	ult in a claim. eases (Officia roperty. If mo	Also list execut al Form 106G). Dore space is nee	ory contracts on to not include and ded, copy the Pa	Schedul y credito art you ne	le A/B: Propers rs with partic ed, fill it out	erty (Official ally secured , number the	I Form claims that e entries in
No. Go to Part 2. Yes. Y	1.	Do any cre	ditors have priority unse	cured claims a	gainst vou?)						
possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1.1 more than one creditor holds a particular claim, list the other creditor's in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim	2.	Yes.	our priority unsecured c									
L DEPT OF HEALTHCARE		possible, lis	t the claims in alphabetical	order according	to the credit	or's name. If y	ou have more tha					
Last 4 digits of account number 7031 \$35,272.00 \$35,272.00 \$0.00		(For an exp	lanation of each type of cla	im, see the instr	uctions for th	is form in the i	nstruction booklet	i.)				
Last 4 digits of account number 7031										Total claim		•
Priority Creditor's Name 100 South Grand Ave E Number Street As of the date you file, the claim is: Check all that apply. Springfield Illinois 62704 Contingent Unliquidated	2.1	IL DEPT OF	HEALTHCARE		Loos	4 diameter of o		7024		\$35.272.00		
Number Street						•				·		
Contingent City State Zip Code Unliquidated Disputed							•					
Springlield Illinois 62704 Unliquidated Disputed Dispute						-	u file, the claim i	s: Check all that a	ipply.			
Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ☐ No ☐ Ves ☐ Debtor 1 held Debtor 2 only ☐ Yes ☐ Last 4 digits of account number					=	Ū						
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes Last 4 digits of account number		,		•		•						
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt is the claim subject to offset? No Yes Zi LDEPT OF HEALTHCARE Priority Creditor's Name 100 South Grand Ave E Number Street Springfield Illinois 62704 City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt is the claim subject to offset? No Debtor 1 contingent Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Disputed Di						•						
Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify Other. Specify Other. Specify Springfield Illinois 62704 City State Zip Code Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify State Zip Code Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Speci		Debtor	2 only					im:				
At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify No Yes 22 IL DEPT OF HEALTHCARE Priority Creditor's Name 100 South Grand Ave E Number Street As of the date you file, the claim is: Check all that apply. Springfield Illinois 62704 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Claims for death or personal injury while you were intoxicated Other. Specify Claims for death or personal injury while you were intoxicated Other. Specify Claims for death or personal injury while you were intoxicated Other. Specify Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify		Debtor	1 and Debtor 2 only		뇓	Domestic sup	oort obligations					
Check if this claim relates to a community debt Is the claim subject to offset? ☐ No ☐ Yes Zel LDEPT OF HEALTHCARE Priority Creditor's Name 100 South Grand Ave E Number Street As of the date you file, the claim is: Check all that apply. Contingent ☐ Unliquidated ☐ Unliquidated ☐ Unliquidated ☐ Debtor 1 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify ☐ Check if this claim relates to a community debt Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ☐ Check if this claim relates to a community debt Is the claim subject to offset? ☐ Check if this claim relates to a community debt ☐ Check if this cl			•	ther			•	· ·				
Is the claim subject to offset? No Yes Other. Specify		=					th or personal inju	ury while you were)			
No Yes Yes				ommunity deb								
Yes			r subject to onset.		ш	o a .o op oo)						
Last 4 digits of account number 2000 \$19,502.00 \$0.00		=										
Priority Creditor's Name 100 South Grand Ave E Number Street Springfield Illinois 62704 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? When was the debt incurred? 10/1/2007 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Unliquidated Unliquidated Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify	22		HEALTHCARE		_					\$19.502.00	\$19,502,00	\$0.00
As of the date you file, the claim is: Check all that apply. Springfield	<u></u> 1	Priority Cred	ditor's Name			_				<u>ψ10,002.00</u>	<u>φ10,002.00</u>	Ψ0.00
As of the date you file, the claim is: Check all that apply. Springfield Illinois 62704 Contingent Unliquidated					Whe	en was the de	ebt incurred?	10/1/2007				
Springfield Illinois 62704 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify			-		As o	f the date yo	u file, the claim i	s: Check all that a	pply.			
City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Vinliquidated Disputed Type of PRIORITY unsecured claim: ✓ Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify		Sprinafield	Illinois	62704	Ш	Contingent						
✓ Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ✓ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ☐ Other. Specify Type of PRIORITY unsecured claim: ✓ Domestic support obligations ☐ Claims of death or personal injury while you were intoxicated ☐ Other. Specify Other. Specify					-	Unliquidated						
Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt Is the claim subject to offset? □ No Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify						Disputed						
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify			•		Туре	of PRIORITY	unsecured clai	im:				
At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify			•		✓	Domestic sup	oort obligations					
Check if this claim relates to a community debt Is the claim subject to offset? No Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify			•	ther		Taxes and cert	ain other debts yo	u owe the governr	ment			
Is the claim subject to offset? Other. Specify		=					th or personal inju	ury while you were	;			
✓ No				community deb								
			i subject to offset?		ш	onler. Specify						
		Yes										

Debtor 1 SenqueCase 16-20458 Doc 1 Filed 06/23/16 Entered 06/23/16 (1/2):33:15 Desc Main
First Name Document Page 24 of 68

Part 1: Vour PRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim Priority amount amount

After listing any entries on this page, number them be	Total claim	Priority amount	Nonpriority amount	
2.3 IL DEPT OF HEALTHCARE Priority Creditor's Name 100 South Grand Ave E Number Street	Last 4 digits of account number 5000 When was the debt incurred? 1/1/2014 As of the date you file, the claim is: Check all that apply.	\$10,053.00	\$10,053.00	\$0.00
Springfield Illinois 62704 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ☑ No ☐ Yes	Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify			

Filed 06423/16 Entered 06/23/16 42:33:15 Desc Main Doc 1 Sengue Case 16-20458 Debtor 1 Document Page 25 of 68 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 City of Chicago Parking \$5,627.36 Last 4 digits of account number Nonpriority Creditor's Name 121 N Lasalle St 107A When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60602 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Parking Tickets Is the claim subject to offset? **✓** No Yes 4.2 U S DEPT OF ED/GSL/ATL \$5,648.00 Last 4 digits of account number 0636 Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 8/1/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent 30301 **ATLANTA** Georgia Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only ✓ Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No l Yes 4.3 US DEPT OF ED/GSL/ATL \$4,138.00 Last 4 digits of account number 3684 Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 8/1/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent ATLANTA Georgia 30301 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that

✓ No Yes

At least one of the debtors and another

Is the claim subject to offset?

Check if this claim relates to a community debt

Other. Specify

you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

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First Name Middle Name Docume Page 26 of 68

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning w	rith 4.5, followed by 4.6, and so forth.	Total claim			
4.4	U S DEPT OF ED/GSL/ATL	- Last 4 digits of account number 0651	\$2,824.00			
	Nonpriority Creditor's Name PO BOX 2287	<u></u>				
	Number Street	When was the debt incurred? 8/1/2010				
		As of the date you file, the claim is: Check all that apply.				
	ATLANTA Georgia 30301	Contingent				
	City State Zip Code	Unliquidated				
	Who incurred the debt? Check one. Debtor 1 only	Disputed				
	Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	Debtor 1 and Debtor 2 only	✓ Student loans				
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that				
	=	you did not report as priority claims				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?	Other. Specify				
	Yes					
4.5	U S DEPT OF ED/GSL/ATL		Ф0 700 00			
4.5	Nonpriority Creditor's Name	Last 4 digits of account number0646	\$2,739.00			
	PO BOX 2287 Number Street	When was the debt incurred? 3/1/2011				
	Number Succession	As of the date you file, the claim is: Check all that apply.				
	ATLANTA Coordia 20204	Contingent				
	ATLANTA Georgia 30301 City State Zip Code	Unliquidated				
	Who incurred the debt? Check one.	Disputed				
	Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	✓ Student loans				
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that				
	At least one of the debtors and another	you did not report as priority claims				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?	Other. Specify				
	✓ No					
	Yes					
4.6	U S DEPT OF ED/GSL/ATL Nonpriority Creditor's Name	Last 4 digits of account number 3680	\$2,660.00			
	PO BOX 2287	When was the debt incurred? 3/1/2011				
	Number Street	As of the date you file, the claim is: Check all that apply.				
		Contingent				
	ATLANTA Georgia 30301 City State Zip Code	Unliquidated				
	Who incurred the debt? Check one.	Disputed				
	Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	✓ Student loans				
	Debtor 1 and Debtor 2 only					
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?	Other. Specify				
	✓ No					
	Yes					

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First Name Middle Name Document Page 27 of 68

Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning v	vith 4.5, followed by 4.6, and so forth.	Total claim			
4.7	U S DEPT OF ED/GSL/ATL	— Leat 4 divite of account number 0000	\$1,810.00			
	Nonpriority Creditor's Name PO BOX 2287	— Last 4 digits of account number0639	<u> </u>			
	Number Street	When was the debt incurred? 8/1/2011				
		As of the date you file, the claim is: Check all that apply.				
	ATLANTA Georgia 30301	Contingent				
	ATLANTA Georgia 30301 City State Zip Code	Unliquidated				
	Who incurred the debt? Check one.	Disputed				
	Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	✓ Student loans				
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that				
	At least one of the debtors and another	you did not report as priority claims				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?	Other. Specify				
	✓ No					
	Yes					
4.8	U S DEPT OF ED/GSL/ATL	Last 4 digits of account number 3678	\$1,536.00			
	Nonpriority Creditor's Name PO BOX 2287	When was the debt incurred? 8/1/2011				
	Number Street	When was the dept incurred:				
		As of the date you file, the claim is: Check all that apply.				
	ATLANTA Georgia 30301	Contingent				
	City State Zip Code	Unliquidated				
	Who incurred the debt? Check one. Debtor 1 only	Disputed				
	<u> </u>	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	✓ Student loans				
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that				
	At least one of the debtors and another	you did not report as priority claims				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?	Other. Specify				
	No					
	Yes					
4.9	U S DEPT OF ED/GSL/ATL	Last 4 digits of account number 0643	\$1,367.00			
	Nonpriority Creditor's Name PO BOX 2287	When was the debt incurred? 3/1/2011				
	Number Street					
		As of the date you file, the claim is: Check all that apply.				
	ATLANTA Georgia 30301	Contingent				
	City State Zip Code	Unliquidated				
	Who incurred the debt? Check one. Debtor 1 only	Disputed				
	Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	Debtor 1 and Debtor 2 only	✓ Student loans				
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that				
	블	you did not report as priority claims				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?	Other. Specify				
	Vac					

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First Name Doc 1

Part 2: Your NONPRIOR	RITY Unsecure	ed Claims - Conti	nuation Page	
After listing any entries	s on this page, nu	mber them beginnin	g with 4.5, followed by 4.6, and so forth.	Total claim
	Nonpriority Creditor's Name PO BOX 2287		Last 4 digits of account number 0655 When was the debt incurred? 8/1/2011 As of the date you file, the claim is: Check all that apply.	\$799.00
ATLANTA City Who incurred the deb Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the de Check if this claim Is the claim subject to You	2 only ebtors and another relates to a comr	30301 Zip Code nunity debt	 ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☑ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify 	

Debtor 1 Senque Case 16-20458 Doc 1 Filed 06423/16 Entered 06/23/166 (1424)33:15 Desc Main

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Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$64,827.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$0.00 6d. Other. Add all other priority unsecured claims. Write that \$0.00 amount here. 6e. Total. Add lines 6a through 6d. \$64,827.00 **Total claims** \$23,521.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or divorce 6g. that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. 6i. Other. Add all other nonpriority unsecured claims. Write that 6i. amount here. \$29,148.36 6j. Total. Add lines 6f through 6i. 6j.

	Case 16-20458	B Doc 1 Filed 0	6/23/16 Ente	ered 06/23/16 12:33:15	Desc Main
Fill in this inform	nation to identify your case			11 11 12 3/10 12.33.13	Desc Main
Debtor 1	Senque First Name	Middle Name	Glass Last Name		
Debtor 2		auc i iaino	2001.100		
(Spouse, if filing	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)		
Case number (If known)					
,	Form 106G				Check if this is a amended filing
Schedu	le G: Executo	ory Contracts	and Unexpi	ired Leases	12/1:
	d, copy the additional pa			are equally responsible for supply this page. On the top of any additi	
1. Do you h	ave any executory o	contracts or unexpired	l leases?		
No. Che	eck this box and file this for	m with the court with your othe	r schedules. You have i	nothing else to report on this form.	
✓ Yes. Fill	in all of the information be	low even if the contracts or lea	ases are listed on <i>Sche</i>	dule A/B: Property (Official Form 106A	√B).
				Then state what each contract or le ore examples of executory contracts ar	
Person	n or company with whom	n you have the contract or le	ease	State what the contrac	t or lease is for
2.1 <u>Lawndale</u> Name	e Properties			Residential Lease, Debtor is Lessee, Residential Yearly Lease	
2500 Wir Number	ndsor Mall Street			residential really Lease	

Park Ridge City

Illinois State

60068 Zip Code

		Case 16-20458	B Doc 1 Filed 0)6/23/16 Entered (06/23/16 12:33:15	Desc Main
Fill	in this inform	ation to identify your case		Ü	0/10 12:00:10	Description
De	btor 1	Senque		Glass	_	
Do	btor 2	First Name	Middle Name	Last Name		
	ouse, if filing	First Name	Middle Name	Last Name	_	
Un	ited States Ba	ankruptcy Court for the:	Northern	_ District of Illinois	_	
	se number	_		(State)	_	
						Check if this is a
\bigcirc 1	fficial E	orm 106H				amended filing
		-				
Sc	hedul	e H: Your Co	debtors			12/1
1.	✓ No Yes			t list either spouse as a codebto	,	ies include Arizona, California, Idaho,
		levada, New Mexico, Pue o to line 3.	rto Rico, Texas, Washington,	and Wisconsin.)		
		,	ouse, or legal equivalent live v	with you at the time?		
	يضا		tate or territory did you live? _	Fill in the i	name and current address of the	at person.
		Name of your spouse, for	ormer spouse, or legal equival	ent	-	
		Number Street			-	
		City	State	Zip Code	-	
3.	as a codeb	tor only if that person is	s a guarantor or cosigner. I		e creditor on <i>Schedule D</i> (Of	the person shown in line 2 again ficial Form 106D), <i>Schedule E/F</i> olumn 2.
	Column 1:	Your codebtor			Column 2: The creditor to	whom you owe the debt

Check all schedules that apply:

Fill in	this information to identify	y your case:			3/16 12:	:33:15 Desc	Main	
	_			age 32	01 00			
Debtor	r 1 Senque First Name	Middle Name	Glass Last Na	 ame	—			
Debtor						Check if this is:		
(Spous	se, if filing) First Name	Middle Name	Last Na	ame		An amended filing		
United	States Bankruptcy Court for the:	Northern	District of Illin	nois tate)	_	A supplement show expenses as of the		
Case r (If know	number vn)					MM / DD / YYYY	_	
Offic	cial Form 106I							
<u>Sch</u>	edule I: Your Ind	come						12/15
nclud nform ages	nsible for supplying cor de information about you nation about your spouse s, write your name and ca 1: Describe Employme	or spouse. If you are seed in the seed is need in the seed is need in the seed	parated and ded, attach a	d your spo a separate	ouse is not filing sheet to this fo	g with you, do no	t include	_
	Fill in your employment		Debtor 1			Debtor 2		
	information.	Employment status	□ Fanala a	1				
	If you have more than one	Employment status	☐ Employe ✓ Not Emp			☐ Employed ☐ Not Employed		
	job, attach a separate page with		MOI EIIIL	Jioyea		Not Employed		
	information about additional	Occupation						
	employers.	Employer's name						
	Include part time, seasonal,	Employer's address						
	or self-employed work.		Number Street	it	_	Number Street		
	Occupation may include							
	student or homemaker, if it applies.		-					
			City	Sta	ate Zip Code	City	State Zip	Code
		How long employed there	?				_	
Part	2: Give Details About	Monthly Income						
Estin	nate monthly income as of the	date you file this form. If you	have nothing to	report for any	line, write \$0 in the s	pace. Include vour non-	filing spouse	unless vou
	eparated.	•	ŭ	, ,	, ,		0 1	,
	or your non-filing spouse have mo arate sheet to this form.	ore than one employer, combine	the information	for all employ	ers for that person on		eed more spa	ace, attach
					For Debtor 1	For Debtor 2 or non-filing spouse		
	List monthly gross wages, salar deductions.) If not paid monthly, ca			2	\$0.00			
3. I	Estimate and list monthly over	time pay.		3	+ \$0.00		<u> </u>	
4.	Calculate gross income. Add lin	ne 2 + line 3.		4.	\$0.00			

Filed 06/23/16 Senque Case 16-20458 Doc 1 Entered @6/23/136 12:33:15 Desc Main Documentame Page 33 of 68 Middle Name For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4 \$0.00 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 5b. 5b. Mandatory contributions for retirement plans \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$0.00 5f. Domestic support obligations 5f. \$0.00 5q. Union dues 5g. \$0.00 5h. + \$0.00 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$0.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$1,300.00 monthly net income. 8a. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: Food Assistance Programs Income \$194.00 8f. 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. + \$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$1,494.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$1,494.00 \$1,494.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies \$1,494.00 Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

	Case 16-20458		6/23/16 Entered 06	/23/16 12:33:15	Desc Maii	n
Fill in this infor	mation to identify your case):	J			
Debtor 1	Senque		Glass			
Dalatano	First Name	Middle Name	Last Name	Chook if this is:		
Debtor 2 (Spouse, if filing	ng) First Name	Middle Name	Last Name	Check if this is:	_	
				An amended filing		ab anton 40
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)	A supplement sho		on chapter 13
Case number			(State)	·	ŭ	
(If known)				MM / DD / YYYY		
Official	Form 106J					
schedu	le J: Your Ex	penses				12/15
nformation. If			e filing together, both are equally form. On the top of any addition			ber
	scribe Your Househo	ıld				
1. Is this a joi		14				
_ ′	o to line 2					
Yes. D	oes Debtor 2 live in a se	parate household?				
	No					
	Yes. Debtor 2 must file	Official Forms 106J-2, Expen	ses for Separate Household of Deb	otor 2.		
2. Do you ha	ve dependents? 🔽 No)				
Do not list Debtor 2.		s. Fill out this information for ch dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does depen with you?	dent live
-	penses include of people other)				
than		ie.				
yourself an dependent	nd your $lacksquare$.5				
<u>uependem</u>	13:					
Part 2: Esti	imate Your Ongoing	Monthly Expenses				
-	of a date after the bankru	* . * *	you are using this form as a sup plemental Schedule J, check th	•		
		ash government assistance on <i>Schedule I: Your Incom</i>			Yo	our expenses
	or home ownership experience or the ground or lot. 4.	enses for your residence. In	clude first mortgage payments and		4.	\$350.00
If not inc	luded in line 4:					
4a. Real e	estate taxes				4a	\$0.00
4b. Prope	rty, homeowner's, or renter	s insurance			4b.	\$0.00
4c. Home	maintenance, repair, and up	keep expenses			4c.	\$0.00

\$0.00

4d.

4d. Homeowner's association or condominium dues

ebtor 1 SenqueCase 16-20458 Doc 1 Filed 06/23/16 Entered 06/23/16 @k2i33:15 Desc Main

Document Page 35 of 68 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$0.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$64.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$200.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$10.00 9. 10. Personal care products and services \$5.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$25.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$65.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _ \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$326.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$249.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

Debtor 1 Senque Co	ase 16-20458	Doc 1	Filed 06¢23/16 Document	Entered 06/23/116 Page 36 of 68	6 (ilka2v33: <u>15 Desc</u>	Main
21. Other. Specify:			Document	Page 30 01 00	21	\$0.00
·					21	
22. Calculate your n	nonthly expenses.					\$1,294.00
22a. Add lines 4 through 21.						\$0.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2						\$1,294.00
22c. Add line 22a and 22b. The result is your monthly expenses.						
23.Calculate your m	nonthly net income.					
23a. Copy line 12 (your combined monthly income) from Schedule I.						\$1,494.00
23b. Copy your monthly expenses from line 22 above.						\$1,294.00
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.						\$200.00
The result is	s your monthly net inco	me.			23c	
24. Do you expect a	n increase or decrea	se in your exp	enses within the year af	er you file this form?		
For example, do	vou expect to finish pa	ving for your car	r loan within the year or do	vou expect vour		
			f a modification to the term			
✓ No						
Yes						
Ex	plain here:					
	plant fiere.					

		Case 16-2045	9 Doc 1 Filad 0	6/22/16 Ento	red 06/23/16 12:33:15	Doce Main
Fill	in this inform	nation to identify your cas		0/2.3/10 1 11/E	TEIT 00/23/10 12.33.13	Desc Main
Del	btor 1	Senque		Glass		
		First Name	Middle Name	Last Name		
	btor 2 ouse, if filing	First Name	Middle Name	Last Name		
Uni	ited States B	ankruptcy Court for the:	Northern	District of Illinois		
0-		, ,		(State)		
	se number (nown)	-				
Of	ficial F	Form 106De	<u>·C</u>			Check if this is a amended filing
De	clarat	ion About a	n Individual De	btor's Sche	edules	12/1
f tw	o married p	eople are filing togethe	er, both are equally respons	ible for supplying corr	ect information.	
1519), and 3571.	Below	eone who is NOT an attorne	·		ars, or both. 18 U.S.C. §§ 152, 1341,
	√ No					
	=	Name of person		Attach Bankrup Signature (Offic	otcy Petition Preparer's Notice, Decla cial Form 119).	aration, and
×		re true and correct.	e that I have read the summ	ary and schedules filed	d with this declaration and	
	Signature o	of Debtor 1	_	Sign	ature of Debtor 2	
	Date 6/23/2	2016 DD/YYYY		Date	MM/DD/YYYY	

Fill in	this inform	Case 16-2045 nation to identify your case		Filed 06/23/16	Entered 06	1/23/16 12:33:15	Desc Main
Debto		Senque		Glass	<u> </u>		
Debto	nr 2	First Name	Middle	Name Last Nar	ne		
		First Name	Middle	Name Last Nar	me		
Unite	d States Ba	ankruptcy Court for the:	Northern	District of Illing			
Case (If kno	number wn)			(5.0			
Offi	cial F	Form 107					Check if this is a amended filing
			ial Affairs	for Individua	ls Filina	for Bankrupt	t CV 12/1
Be as	complete	and accurate as possi	ole. If two married	people are filing together	r, both are equal	lly responsible for supply	ying correct information. If more er (if known). Answer every question
Part 1	Give	Details About You	Marital Status	s and Where You Live	ed Before		
1.	What is	your current marital st	atus?				
	☐ Mar	ried married					
2.	During th	he last 3 years, have yo	u lived anywhere	other than where you live	now?		
	✓ No Yes.	List all of the places you	ived in the last 3 ye	ars. Do not include where yo	ou live now.		
	Deb	tor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
					Same as	Debtor 1	Same as Debtor 1
	Num	ber Street		From	Number Stre	eet	From
				_ To			То
	City	State	Zip Code	_	City	State Zip C	 Code
					Same as	Debtor 1	Same as Debtor 1
	Num	ber Street		- From	Number Stre	pet	From
				_ To			To
				_			
	City	State	Zip Code		City	State Zip C	Code

Debtor 1 SenqueCase 16-20458 Doc 1 Filed 06623/16 Entered 06/23/16 (Ac2i33:15 Desc Main Pige Name Document Page 39 of 68

No ✓ Yes. Fill in the details.	I from all jobs and all businesses nave income that you receive tog	, including part-time	two previous calendar years? Debtor 1.	
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips✓ Operating a business	\$7400.00	Wages, commissions, bonuses, tips Operating a business	
For last calendar year: (January 1 to December 31,	Wages, commissions, bonuses, tips✓ Operating a business	\$2400.00	Wages, commissions, bonuses, tips Operating a business	
For the calendar year before that: (January 1 to December 31,	Wages, commissions, bonuses, tips Operating a business		Wages, commissions, bonuses, tips Operating a business	
Include income regardless of whether that income benefit payments; pensions; rental income; interand you have income that you received togethe	erest; dividends; money collected	from lawsuits; royalties; and		
benefit payments; pensions; rental income; inte	erest; dividends; money collected r, list it only once under Debtor 1.	income are alimony; child s from lawsuits; royalties; and	d gambling and lottery winnings.	
benefit payments; pensions; rental income; inte and you have income that you received togethe List each source and the gross income from each sou	erest; dividends; money collected r, list it only once under Debtor 1.	income are alimony; child s from lawsuits; royalties; and	d gambling and lottery winnings.	
benefit payments; pensions; rental income; inte and you have income that you received togethe List each source and the gross income from each sou	erest; dividends; money collected r, list it only once under Debtor 1. ach source separately. Do not inc	income are alimony; child s from lawsuits; royalties; and	d gambling and lottery winnings.	
benefit payments; pensions; rental income; inte and you have income that you received togethe List each source and the gross income from ea	erest; dividends; money collected r, list it only once under Debtor 1. ach source separately. Do not inc. Debtor 1 Sources of income	Gross income from each source (before deductions and	d gambling and lottery winnings. in line 4. Debtor 2 Sources of income	If you are filing a joint ca Gross income from each source (before deductions and
benefit payments; pensions; rental income; interest and you have income that you received together. List each source and the gross income from each of the gross income fr	Prest; dividends; money collected r, list it only once under Debtor 1. Ach source separately. Do not income Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions)	d gambling and lottery winnings. in line 4. Debtor 2 Sources of income	If you are filing a joint ca Gross income from each source (before deductions and

Debtor 1 SenqueCase 16-20458 First Name Doc 1

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

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Are eith	er Debtor 1's o	r Debtor 2's o	debts primarily con	sumer debts?							
No.			or 2 has primarily c sehold purpose."	onsumer debts. Cons	sumer debts are defined in 1	1 U.S.C. § 101(8) as "incurr	ed by an individual primarily				
	During the 90 o	,									
	No. Go to	line 7.									
	Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.										
	* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.										
✓ Yes.	. Debtor 1 or D	ebtor 2 or bo	th have primarily c	onsumer debts.							
_	During the 90 c	days before yo	u filed for bankruptcy,	did you pay any credito	or a total of \$600 or more?						
			, i i i i i i i i i i i i i i i i i i i	, , ,	, , , , , , , , , , , , , , , , , , ,						
	✓ No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.										
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for				
	editor's Name				-	-	Mortgage Car Credit card				
_							Loan repayment Suppliers or				
Cit	ty	State	Zip Code				vendors Other				
Cr	editor's Name				_	_	─ Mortgage─ Car				
Nu	ımber Street						Credit card Loan repayment				
Cit	ty	State	Zip Code				Suppliers or vendors Other				
_							- Mortgage				
Cr	editor's Name						Car				
Nu	ımber Street						Credit card				
_							Loan repayment				
Cit	tv	State	Zip Code				Suppliers or vendors				
Oil	• 9	Sidio	Zip Oodc				Other				

Doc 1 Debtor 1 Document Page 41 of 68 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

Debtor 1 Senque Case 16-20458 First Name Doc 1

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

dispu						
$\stackrel{\checkmark}{=}$	No Yes. Fill in the details.					
_	Teer in in the detaile.	Nature of the case	Court or agency			Status of the case
	Case title					Pending
		-	Court Name			On appeal
	Case number		Number Street			Concluded
		-	Number Street			_
			City S	State	Zip Code	_
	Case title					Pending
		-	Court Name			On appeal
	Case number		Number Street			- Concluded
		-	0:1	21-1-	7: 0. 1.	_
			City S	State	Zip Code	
	No. Go to line 11. Yes. Fill in the information below.	Describe the	property		Date	Value of the
		Describe the	property		Date	Value of the property
	Yes. Fill in the information below.	Describe the	property		Date	
					Date	
	Yes. Fill in the information below. Creditor's Name	Describe the Explain what			Date	
	Yes. Fill in the information below.	Explain what	happened		Date	
	Yes. Fill in the information below. Creditor's Name	Explain what			Date	
	Yes. Fill in the information below. Creditor's Name	Explain what Property w Property w	happened vas repossessed.		Date	
	Yes. Fill in the information below. Creditor's Name Number Street	Explain what Property w Property w Property w	happened vas repossessed. vas foreclosed.	d .	Date	
	Yes. Fill in the information below. Creditor's Name Number Street	Explain what Property w Property w Property w	happened vas repossessed. vas foreclosed. vas garnished. vas attached, seized, or leviec	d .	Date	
	Yes. Fill in the information below. Creditor's Name Number Street City State Zip	Explain what Property w Property w Property w Property w	happened vas repossessed. vas foreclosed. vas garnished. vas attached, seized, or leviec	d.		Property Value of the
	Yes. Fill in the information below. Creditor's Name Number Street	Explain what Property w Property w Property w Property w Property w Describe the	happened vas repossessed. vas foreclosed. vas garnished. vas attached, seized, or leviec	d.		Property Value of the
	Yes. Fill in the information below. Creditor's Name Number Street City State Zip Creditor's Name	Explain what Property w Property w Property w Property w	happened vas repossessed. vas foreclosed. vas garnished. vas attached, seized, or leviec	1.		Property Value of the
	Yes. Fill in the information below. Creditor's Name Number Street City State Zip	Explain what Property w Property w Property w Property w Property w Explain what	happened vas repossessed. vas foreclosed. vas garnished. vas attached, seized, or leviece property happened	d.		Property Value of the
	Yes. Fill in the information below. Creditor's Name Number Street City State Zip Creditor's Name	Explain what Property w Property w Property w Property w Property w Explain what Explain what	happened vas repossessed. vas foreclosed. vas garnished. vas attached, seized, or levied property happened vas repossessed.	d.		Property Value of the
	Yes. Fill in the information below. Creditor's Name Number Street City State Zip Creditor's Name	Explain what Property w Property w Property w Property w Property w Explain what Explain what Property w Property w Property w	happened vas repossessed. vas foreclosed. vas garnished. vas attached, seized, or levied property happened vas repossessed. vas foreclosed.	d.		Property Value of the
	Yes. Fill in the information below. Creditor's Name Number Street City State Zip Creditor's Name Number Street	Explain what Property w Property w Property w Property w Property w Explain what Property w Property w Property w Property w Property w	happened vas repossessed. vas foreclosed. vas garnished. vas attached, seized, or levied property happened vas repossessed.			Property Value of the

Debt	tor 1		<u>ed 06623/16 Entered </u> 06/23/46	:15 Desc	Main
11.		ounts or refuse to make a payment because you ow	creditor, including a bank or financial institution, set o	off any amounts fr	rom your
		No Yes. Fill in the details.			
			Describe the action the creditor took	Date action was taken	Amount
		Creditor's Name	-		
		Number Street	_	_	
			_ Last 4 digits of account number: XXXX-		
		City State Zip Code	-		
12.		in 1 year before you filed for bankruptcy, was any iver, a custodian, or another official?	of your property in the possession of an assignee for the	ne benefit of credi	itors, a court-appointed
	✓	No Yes			
Part	5:	List Certain Gifts and Contributions			
13.	Wit	thin 2 years before you filed for bankruptcy, did you	u give any gifts with a total value of more than \$600 per	person?	
	✓	No Yes. Fill in the details for each gift.			
		Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
		Person to Whom You Gave the Gift	-		
		Northern Objects	-		
		Number Street	_		
		City State Zip Code Person's relationship to you		_	
		Person to Whom You Gave the Gift	- -		
		Number Street	-		
		City State Zip Code Person's relationship to you	-		
		1 CISOTIS TETALIONISTIP to you			

		FIRST Name	Middle Name D	ocument Page 44 of 68		
14.	With	nin 2 years before you file		give any gifts or contributions with a total value of mor	e than \$600 to an	y charity?
	✓	No Yes. Fill in the details for ea	ach gift or contribution.			
	_	Gifts with a total value of per person		Describe the gifts	Dates you gave the gifts	Value
		Charity's Name		-		
				-		
		Number Street		_		
Dow	c.	City State _ist Certain Losses	e Zip Code			
Part	With		for bankruptcy or since y	ou filed for bankruptcy, did you lose anything because	of theft, fire, othe	r disaster, or
	<u></u>	No Yes. Fill in the details.				
	Ч	Describe the property yo how the loss occurred	ou lost and	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
				Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property.</i>		
Part	7:	ist Certain Payment	ts or Transfers			
16.	seek	ing bankruptcy or prepar	ring a bankruptcy petition	or anyone else acting on your behalf pay or transfer any p ? lit counseling agencies for services required in your bankrupto		ne you consulted about
		No	, position proportions, or oron		· ·	
	N	Yes. Fill in the details.		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
		Semrad Law Firm		Attorney's Fee - 400.00	6/23/2016	\$400.00
		Person Who Was Paid 20 South Clark Street 28th	Floor			
		Number Street	i Flooi	-		
		Chicago Illino	ois 60606	-		
		City State	e Zip Code			
		Email or website address				
		Person Who Made the Pay	ment, if Not You		1	
		Person Who Was Paid		-		
		Number Street		- -		
		City State	e Zip Code	-		
		Email or website address				
		Person Who Made the Pay	ment, if Not You			

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<u>~</u>	No Yes. Fill in the details.						
	res. Fill III the details.		Description and value of any propo	erty transferred	Date payment or transfer was made	Amou	nt of paymer
	Person Who Was Paid						
	Number Street						
	City State Zi	p Code					
	lude both outright transfers and transfers masfers that you have already listed on this sta No Yes. Fill in the details.						
			Description and value of any property transferred		property or paym ebts paid in exch		Date trans was made
	Person Who Received Transfer						
	Number Street						
	City State Zi Person's relationship to you	p Code					
	Person Who Received Transfer						
	Number Street						
	City State Zi Person's relationship to you	p Code					
	thin 10 years before you filed for bankru nese are often called asset-protection device No		transfer any property to a self-settle	d trust or similar de	evice of which yo	u are a∣	beneficiary?
			Description and value of the prop	erty transferred			Date trans
(Tr	Yes. Fill in the details.						was made

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	Document 1 age 40 of 00
Part 8:	List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20.	or tra	nin 1 year before you filed for ba ansferred? de checking, savings, money mark peratives, associations, and other fi	et, or other financial							
		No Yes. Fill in the details.								
		ies. i iii iii tie tetaiis.		Last 4 numb	l digits of account er		Type of a	account or ent	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
		Person Who Was Paid		- XXXX	-		Chec	cking ngs		
		Number Street		-		[[ey market ærage er		
		City State	Zip Code	-						
		Person Who Was Paid		- XXXX	-		Chec	cking ngs		
		Number Street		-			Brok	ey market erage		
						L	Othe	er		
		City State	Zip Code	-						
	✓	ables? No Yes. Fill in the details.	w	/ho else	had access to it?			Describe the contents	3	Do you still have it?
		Name of Financial Institution	Na Na	ame						☐ No
		Number Street	Nu	umber	Street					Yes
		-	Ci	tv	State	Zip Coo	de.			
		City State	Zip Code	-,		_p				
22.	Have	e you stored property in a stora	ge unit or place oth	er than	your home within	1 year be	efore yo	ou filed for bankruptcy	?	
		No Yes. Fill in the details.								
			w	ho else	had access to it?			Describe the contents	S	Do you still have it?
		Name of Storage Facility	Na	ame						☐ No ☐ Yes
		Number Street	Nu	umber	Street					
		-	Ci	ty	State	Zip Cod	de			
		City State	Zip Code							

Describe the control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.	Deb	tor 1	SenqueCase 16-20458 Doc 1 First Name Middle Name	Filed 0662 Docume	<u>3√16 Er</u> Mt ^{me} Paç	ntered 06/2 ge 47 of 68	3416 142:33: <u>15 Desc Mair</u>	1
No Yes. Fill in the details. Where is the property? Describe the contents Value	Part	9:	Identify Property You Hold or Control	I for Someo	ne Else			
Where is the property? Number Street Number Street	23.		No	e else owns? In	clude any pro	perty you borro	wed from, are storing for, or hold in trus	st for someone.
Number Street		ш	Too. I ill ill the details.	Where is the	property?		Describe the contents	Value
City State Zip Code			Owner's Name	Number Street	et		-	
City State Zip Code Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: ## Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material. ## Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material. ## Site means any location, facility, or property as defined under any environmental law, or used to own, operate, or utilize it, including disposal sites. ## Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. **Report all notices, releases, and proceedings that you know about, regardless of when they occurred. ## Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No			Number Street				-	
City State Zip Code Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: ## Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material. ## Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material. ## Site means any location, facility, or property as defined under any environmental law, or used to own, operate, or utilize it, including disposal sites. ## Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. **Report all notices, releases, and proceedings that you know about, regardless of when they occurred. ## Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No				City	State	Zin Code	-	
Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: ### Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material in the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. ##### Sile means any location, facility, or properly as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. #### Hazardous material pollution, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. #### About 10 page 10 pa			City State Zip Code	- -	Ciaio	Zip Godo		
For the purpose of Part 10, the following definitions apply: ### Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, wastes, or material. #### Streem was any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. #### Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. ###################################	Parí	10.		formation				
■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. ■ Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. ■ Hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No								
Z5. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Governmental unit Finvironmental law, if you know it Name of site Number Street Number Street City State Zip Code		ha in or or to bort al	azardous or toxic substances, wastes, or material in cluding statutes or regulations controlling the clear ite means any location, facility, or property as define used to own, operate, or utilize it, including dispossazardous material means anything an environmentaxic substance, hazardous material, pollutant, contail notices, releases, and proceedings that you know any governmental unit notified you that you not No Yes. Fill in the details.	nto the air, land, anup of these sub ad under any envisal sites. al law defines as aminant, or similar about, regardles about, regardles any be liable or Government	soil, surface wastances, waste stances, waste ironmental law, a hazardous war term. ss of when they repotentially liable tal unit	ater, groundwater, es, or material. whether you now raste, hazardous so occurred.	or other medium, own, operate, or utilize it substance, violation of an environmental law?	Date of notice
25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Governmental unit Name of site Number Street Number Street City State Zip Code Date of notice				City	State	Zip Code	-	
No Yes. Fill in the details. Governmental unit Name of site Number Street City State Zip Code Environmental law, if you know it Date of notice Environmental law, if you know it City State Zip Code			City State Zip Code	_				
Name of site Governmental unit Number Street City State Zip Code	25.	_	No			?		
Number Street Number Street City State Zip Code				Government	lai uriit		Environmental law, if you know it	Date of notice
City State Zip Code			Name of site	Governmenta	l unit			
			Number Street	Number Stree	et		-	
City State Zip Code				City	State	Zip Code	-	
			City State Zip Code	_				

Debto	or 1	SenqueCase 16-2045 First Name	Middle Name	<u>-iled 06¢23/16</u> Documetnt™	<u>Entered</u> 0%/2 3 Page 48 of 68	h16 Ak2i33: <u>15</u>	Desc Main
26 .	Hav	e you been a party in any ju	dicial or administra	tive proceeding under	any environmental law	? Include settlements	and orders.
ļ	✓	No					
	Ш	Yes. Fill in the details.		Court or agency		Nature of the case	Status of the
				Court of agency		ivature of the case	case
		Case title					Pending
				Court Name			On appeal
		Case number		Number Street			Concluded
				City State	zip Code		_
Part 1	1:	Give Details About Yo	ur Business or	Connections to An	y Business		
27.	Witl	nin 4 years before you filed f	or bankruptcy, did	you own a business or	have any of the follow	ing connections to an	v business?
		A sole proprietor or self-e			-		, such local
		A member of a limited lia			•	-ume	
		A partner in a partnership					
		An officer, director, or ma An owner of at least 5% of the second secon			nn		
1		No. None of the above applies		occurries of a corporation			
		Yes. Check all that apply above		below for each business			
				Describe the nat	ture of the business		entification number Do not all Security number or ITIN.
						EIN:	a Security number of Trin.
		Business Name				Ziiv.	
		Number Street		Name of accoun	ntant or bookkeeper	Dates busine	ss existed
		City State	7in Codo		itant of bookkeeper	From	То
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				Describe the nat	Describe the nature of the business		entification number Do not al Security number or ITIN.
		Business Name				EIN:	
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		City State	Zip Code			From	To
				Describe the nat	ture of the business		entification number Do not
						EIN:	al Security number or ITIN.
		Business Name				LIIV.	
		Number Street		Name of accoun	ntant or bookkeeper	Dates busine	ss existed
		City State	Zip Code			From	To
						<u> </u>	

Debto		<u>d 06623/16 Entered </u> 06/23/166 /142:33: <u>15 Desc Main</u>
	First Name Middle Name DC	ocument Page 49 of 68
	Within 2 years before you filed for bankruptcy, did you g creditors, or other parties.	ive a financial statement to anyone about your business? Include all financial institutions,
[No Yes. Fill in the details below.	
ı	Tes. Fill III the details below.	Date issued
	Name	MM/DD/YYYY
	Number Street	
		_
	City State Zip Code	
Part 1	2: Sign Below	
ar	nd correct. I understand that making a false statement,	ffairs and any attachments, and I declare under penalty of perjury that the answers are true concealing property, or obtaining money or property by fraud in connection with a risonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signature of Debtor 1	Signature of Debtor 2
	Date 6/23/2016	Date
Di	id you attach additional pages to Your Statement of Fin	ancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
V	/ No	
	Yes	
Di		
	id you pay or agree to pay someone who is not an attori	ney to help you fill out bankruptcy forms?
~	id you pay or agree to pay someone who is not an attorn No	ney to help you fill out bankruptcy forms?
∠	=	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

	ľ	iorthern district or illinois	
n re	Senque Glass	Case No.	(M. Ingarage)
	Debtor	Chanter	(If known)
		Chapter	Chapter 13
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Banl		or the abovenamed debtor(s) and tha
		ore the filing of the petition in bankruptcy, or agebtor(s) in contemplation of or in connection w	
	For legal services, I have agreed to accept		\$4,000.0
	Prior to the filing of this statement I have rec	eived	\$400.0
	Balance Due		\$3,600.0
2.	The source of the compensation paid to me w	as:	
	✓ Debtor	Other (specify)	
3.	The source of the compensation paid to me is	:	
	✓ Debtor	Other (specify)	
4.	I have not agreed to share the above-disc members and associates of my law firm.	closed compensation with any other person un	less they are
		ed compensation with a other person or person copy of the agreement, together with a list of a stached.	
5.	In return for the above-disclosed fee, I have a a. Analysis of the debtor's financial situat bankruptcy;	agreed to render legal service for all aspects o ion, and rendering advice to the debtor in dete	
	b. Preparation and filing of any petition,	schedules, statements of affairs and plan whic	h may be required;
	c. Representation of the debtor at the me	eting of creditors and confirmation hearing, an	d any adjourned hearings thereof;
	d. Representation of the debtor in advers	ary proceedings and other contested bankrup	tcy matters;
6.	By agreement with the debtor(s), the above-d	isclosed fee does not include the following ser	vices:
		CERTIFICATION	
		CERTIFICATION	
	I certify that the foregoing is a complete staten debtor(s) in this bankruptcy proceedings.	nent of any agreement or arrangement for pay	ment to me for representation of
	6/23/2016	/s/ Mark Bernachea	
	Date	Signature of Attorney	
		Semrad Law Firm	

Name of law firm

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

S. G.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

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- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

S.C.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate

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tasks and functions for the attorney amd support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

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F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- 3. Before signing this agreement, the attorney has received, \$ 400.00 toward the flat fee, leaving a balance due of \$ 3600.00 ; and \$ 72.00 for expenses, leaving a balance due for the filing fee of \$ 310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 06/23/2016	
Signed:	
Molaco	
Debtor(s)	Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

1. Ct.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-20458 Doc 1 Filed 06/23/16 Entered 06/23/16 12:33:15 Desc Main UNITED STATES BANKBURTCY COURT Northern District of Illinois

In re:	Glass, Senque	Case No.			
_	Debtor(s)				
		Chapter. Chapter13			
	VERIFICATION OF CREDITOR MATRIX				
	The above named Debtors hereby verify	y that the attached list of creditors is true and correct to the best of their kn	owledge.		
Date:	6/23/2016	/s/ Glass, Senque			
		Glass, Senque			

Signature of Debtor

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IL DEPT OF HEALTHCARE 100 South Grand Ave E Springfield , IL 62704 USA

IL DEPT OF HEALTHCARE 100 South Grand Ave E Springfield , IL 62704 USA

IL DEPT OF HEALTHCARE 100 South Grand Ave E Springfield , IL 62704 USA

U S DEPT OF ED/GSL/ATL PO BOX 2287 ATLANTA , GA 30301 USA

U S DEPT OF ED/GSL/ATL PO BOX 2287 ATLANTA , GA 30301 USA

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U S DEPT OF ED/GSL/ATL PO BOX 2287 ATLANTA, GA 30301 USA Case 16-20458 Doc 1 Filed 06/23/16 Entered 06/23/16 12:33:15 Desc Main Auto Finance Document Page 63 of 68

Chase Auto Finance 201 N. Central Ave. Phoenix , AZ 85004 USA

City of Chicago Parking 121 N Lasalle St 107A Chicago , IL 60602 USA

Case 16-20458 Doc 1 Filed 06/23/16 Entered 06/23/16 12:33:15 Desc Main Document Page 64 of 68 Case number (if known) Glass Debtor 1 Senque Middle Name Last Name First Name Answer These Questions for Reporting Purposes Part 6: 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 16. What kind of debts do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are Do you estimate that paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? 25,001-50,000 1,000-5,000 **√** 1-49 18. How many creditors 50,001-100,000 5,001-10,000 50-99 do you estimate that More than 100,000 10,001-25,000 100-199 you owe? 200-999 \$500,000,001-\$1 billion] \$1,000,001-\$10 million **✓** \$0-\$50,000 \$1,000,000,001-\$10 billion 19. How much do you \$10,000,001-\$50 million \$50,001-\$100,000 estimate your assets \$10,000,000,001-\$50 billion \$50,000,001-\$100 million \$100,001-\$500,000 to be worth? More than \$50 billion \$100,000,001-\$500 million \$500,001-\$1 million \$500,000,001-\$1 billion 31,000,001-\$10 million \$0-\$50,000 20. How much do you \$1,000,000,001-\$10 billion \$10,000,001-\$50 million \$50,001-\$100,000 estimate your \$10,000,000,001-\$50 billion \$50,000,001-\$100 million \$100,001-\$500,000 liabilities to be? More than \$50 billion \$100,000,001-\$500 million \$500,001-\$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Debtor 2

Executed on _

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years,

or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Sengue Glass

Executed on __6/23/2016

Signature of Debtor 1

MM / DD / YYYY

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		Docume	ent Page 65	0 01 08
Fill in this infor	mation to identify your case	e:		
Debtor 1	Senque		Glass	
	First Name	Middle Name	Last Name	
Debtor 2	ng) First Name	Middle Name	Last Name	
(Opouse, a min	19) First Name	Middle Name	Lastiname	
United States	Bankruptcy Court for the:	Northern D	District of Illinois	
Case number			(State)	
(If known)				
Official	Form 106Do	•		Check if this is ar amended filing
	Form 106De	_		, and the second
Declara	tion About a	n Individual Deb	tor's Schedu	ules 12/15
		r, both are equally responsible		
You must file t	his form whenever you fi	le bankruptcy schedules or an	nended schedules. Mak	king a false statement, concealing property, or obtaining money or
property by fra 1519, and 3571		pankruptcy case can result in t	ines up to \$250,000, or	imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341,
Part 1: Sign	n Below			
Did you r	nay or agree to nay some	one who is NOT an attorney to	help you fill out bankru	uptcy forms?
Dia you p	oay or agree to pay come	one who is not an allerney to	noip you iii out buiiii o	aptoy rolling.
✓ No				
Yes.	Name of person		, ,	Petition Preparer's Notice, Declaration, and
			Signature (Official F	Form 119).
Under pe	enalty of periury I declare	that I have read the summary	and schedules filed wit	th this declaration and
	are true and correct.			
🗶 /s/ Senqi	ue Glass S. Ga	la-co	*	
	of Debtor 1		Signature	re of Debtor 2

Date

MM/DD/YYYY

Date 6/23/2016

MM/DD/YYYY

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Debtor 1	Senque		Glass	Case number (if known)
Destor	First Name	Middle Name	Last Name	
	thin 2 years before you editors, or other parties No Yes. Fill in the details b	5.	u give a financial statemer	nt to anyone about your business? Include all financial institutions,
			Date issued	
	Name		MM/DD/YYYY	
	Number Street			
	rangs. Guser			
	City	State Zip Code	·· ···	
Part 12:	Sign Below			
and	correct. I understand t	that making a false statemen	t, concealing property, or	nts, and I declare under penalty of perjury that the answers are true obtaining money or property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	🗶 /s/ Ser	nque Glass S. Clar	-2-	×
		of Debtor 1		Signature of Debtor 2
	Date 6/2	23/2016		Date
Did	you attach additional p	pages to Your Statement of F	Financial Affairs for Individ	duals Filing for Bankruptcy (Official Form 107)?
	No Yes			
Did	you pay or agree to pa	y someone who is not an att	orney to help you fill out b	ankruptcy forms?
V	No			
	Yes, Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

page 12

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Glass, Senque	Case No	
	Debtor(s)		
		Chapter. Chapter13	
	VERIFICA	ATION OF CREDITOR MATRIX	
Th	e above named Debtors hereby verify that	the attached list of creditors is true and correct to the best of their	r knowledge.
Date:	6/23/2016	/s/ Glass, Senque f. Class	
		Glass, Senque Signature of Debtor	

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Deptor		Senque		Glass	Case number (if known)	
	lot no to proper per	First Name	Middle Name	Last Name	HERPER I TOTAL PARTIES TO THE PROPERTY OF THE	
16. C	Calc	culate the median family in	ncome that applies to yo	ou. Follow these steps:		
1	6a.	Fill in the state in which you	ı live.	Illinois		
1	6b.	Fill in the number of people	in your household.	1		
1	6c.	Fill in the median family inc To find a list of applicable n also be available at the bar	nedian income amounts,		ecified in the separate instructions for this form. This list may	\$49,741.00
17. F	low	do the lines compare?				
1	7a.				check box 1, Disposable income is not determined under 11 ble Income (Official Form 122C-2).	
1	7b.		t 3 and fill out Calculati		2, Disposable income is determined under 11 U.S.C. § ne (Official Form 122C-2). On line 39 of that form, copy you	г
Part 3:	d	Calculate Your Comm	itment Period Unde	er 11 U.S.C. §1325(b	9)(4)	
18. C	opy	y your total average mont	hly income from line 11.	•		\$1,429.33
					filing with you, and you contend that calculating the ouse's income, copy the amount from line 13.	
1	9a.	If the marital adjustment do	es not apply, fill in 0 on line	e 19a.		-\$0.00
1	9b.	Subtract line 19a from lin	ne 18.			\$1,429.33
20. C	alc	ulate your current monthly	y income for the year. F	ollow these steps:		
2	0a.	Copy line 19b.				\$1,429.33
		Multiply by 12 (the number	of months in a year).			x 12
2	0b.	The result is your current m	onthly income for the year	r for this part of the form.		\$17,151.96
2	0c.	Copy the median family inco	ome for your state and size	e of household from line 16	c.	\$49,741.00
21. H	ow	do the lines compare?				
E		Line 20b is less than line 20c period is 3 years. Go to Part		d by the court, on the top o	f page 1 of this form, check box 3, The commitment	
		ine 20b is more than or equ commitment period is 5 years		rwise ordered by the court,	on the top of page 1 of this form, check box 4, The	
art 4:	s	ign Below				
		By signing here, I declare un	der penalty of perjury that	the information on this sta	tement and in any attachments is true and correct.	
		X /s/ Senque Glass	101	×		
		Signature of Debtor 1	, alass		ignature of Debtor 2	
		Date 6/23/2016		n	pate	
		MM/DD/YYYY		J	MM/DD/YYYY	
		If you checked 17a, do NOT If you checked 17b, fill out Fo			t form, copy your current monthly income from line 14 above.	